Electronic Signature of Registered Agent

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Officer/Director Detail :			
Title	PD	Title	VD
Name	MATUTE, DAPHNE G	Name	MATUTE, JOSE G
Address	6420 SW 46 TERRACE	Address	6420 SW 46 TERRACE
City-State-Zip:	MIAMI FL 33155	City-State-Zip:	MIAMI FL 33155

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000076167

Entity Name: GURRI MATUTE, P.A.

Current Principal Place of Business:

5001 S.W. 74TH COURT SUITE 208 MIAMI, FL 33155

Current Mailing Address:

5001 S.W. 74TH COURT SUITE 208 MIAMI, FL 33155

FEI Number: 65-1038126

Name and Address of Current Registered Agent:

MATUTE, DAPHNE G 6420 SW 46 TERRACE MIAMI, FL 33155 US

SIGNATURE:

Officer/Director Detail .

oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 02/02/2018 SIGNATURE: DAPHNE G MATUTE **PRESIDENT / OWNER**

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under

Electronic Signature of Signing Officer/Director Detail

FILED Feb 02, 2018 Secretary of State CC1181274541

Certificate of Status Desired: Yes

Date

Date